HealthForceOntario

HealthForceOntario Marketing and Recruitment Agency

Annual Report 2012/13

Ensuring that Ontarians have access to the right number and mix of qualified health-care providers, when and where they are needed, now and in the future.

Ontario

HealthForceOntario Marketing and Recruitment Agency

Table of Contents

Letter from Chair and Executive Director 1

Letter from Assistant Deputy Minister 2

How the Agency Adds Value 3

HFO MRA Partners 5

Vision 6

Corporate Values 7

Current Programs and Services 8

Forthcoming Programs and Services 12

Five Client Groups HFO MRA Serves 13

Residents/Medical Students/Allied Health Students 14

Resident Testimonial 14

Agency Accomplishments 14

Health-Care Professionals Practising in Ontario 16

Health-Care Professional Success Story 16

Agency Accomplishments 17

External Physicians 18

External Physician Success Story 18

Agency Accomplishments 18

Internationally Educated Health Professionals (IEHPs) 20

IEHP Success Story 20

Agency Accomplishments 20

Communities 22

Service Provided to Communities 22

Chatham Profile 31

Kitchener-Waterloo Profile 33

Thunder Bay Profile 35

2012/13 HFO MRA Performance Results 38

Analysis of Operational Performance 41

Corporate Governance 42

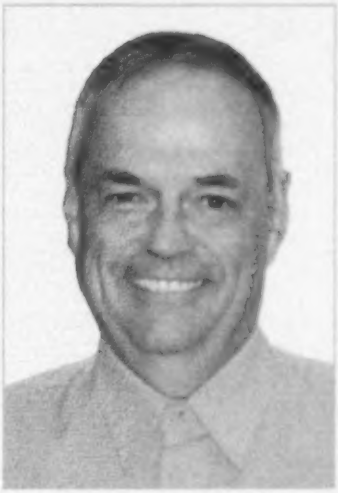
Government Directives 43

2012/13 Audited Financial Statements 44

Analysis of Financial Position 61

Appendix A: Board Member Biographies 62

2012/13 Annual Report



2012/13 was a time of change and new experiences at HealthForceOntario Marketing and Recruitment Agency. After more than six years, Brad Sinclair, the Agency's inaugural Executive Director, accepted a position at another organization. Under his leadership, the Agency experienced significant growth in response to Government requests to take on greater challenges, and we are most appreciative of his guidance. After several months of assuming our roles on an interim basis – as Board Chair and Executive Director – we were delighted to move into more permanent positions.

Mid year, we received notice the Office of the Auditor General of Ontario would be conducting a value-for-money audit of HealthForceOntario – the province's health human resources strategy. One of the criteria the Auditor uses to decide which Ministry or Agency program to audit is the impact of the program or activity on the public. It is therefore not surprising HealthForceOntario was selected, and that as the operational arm of the strategy, the Agency was engaged. Any opportunity for improvement is a good one, and we look forward to receiving the Auditor's recommendations later this year.

As a publicly funded organization, we welcome the opportunity to continue to demonstrate our commitment to accountability, transparency, and value-for-money.

We had many achievements in 2012/13 and are pleased to share them in this report. We are thankful for the support of our partners who have helped us be successful, in particular our colleagues in the Local Health Integration Networks, and in the Health Human Resources Strategy Division of the Ministry of Health and Long-Term Care.

None of our accomplishments would have been possible without the Agency staff and the commitment and quality that is evident in their work. Their individual and collective contributions are much appreciated.

Thanks are also extended to the members of the Board, each of whom brings considerable skill and insight to our strategic and policy deliberations.

We trust you will enjoy reading about our progress over the past year, and we look forward to continuing to contribute to enhancing health human resources in Ontario.

Peter Wells, MD, CCFP, FCFP, FRRMS
Chair

Roz Smith, MHSc, CAE
Executive Director

HealthForceOntario

Ministry of Health and Long-Term Care

Health Human Resources Strategy Division

2nd Floor, Macdonald Block
900 Bay Street, Suite M2-61
Toronto ON M7A 1R3
Tel.: 416 212-7685
Fax: 416 314-3751

www.healthforceontario.ca

Ministère de la Santé et des Soins de longue durée

Division de la stratégie des ressources humaines dans le domaine de la santé

Édifice Macdonald, 2e étage
900, rue Bay, bureau M2-61
Toronto ON M7A 1R3
Tél.: 416 212-7685
Téléc.: 416 314-3751

www.professionssantecontario.ca

Ontario

JUL 1 2 2013

HLTC2966IT-2013-185

Dr. Peter Wells
Chair, Board of Directors
HealthForceOntario Marketing and Recruitment Agency
163 Queen Street East
Toronto ON M5A 1S1

Dear Dr. Wells:

Re: 2012/13 Annual Report for the HealthForceOntario Marketing and Recruitment Agency (HFO MRA)

It is my pleasure to write to you as you reflect on the 2012/13 year. The HealthForceOntario Marketing and Recruitment Agency (HFO MRA) is an important part of Ontario's health human resources strategy "HealthForceOntario". HFO MRA provides valuable services to health care providers and communities seeking to recruit new health care providers to their communities through its many programs and services. Working together, we have increased access to many health care providers over the last decade.

It is exciting to see the work of your agency changing in response to the ever-evolving health human resource landscape. Increasingly the emphasis of HFO MRA's recruitment and retention activities are shifting to help connect local communities and health care professionals in Ontario, and getting health care providers to the places where they are most needed.

I am happy to see that HFO MRA continues to build on its strengths and the successes of previous years, including the following 2012/13 achievements:

- 100% of Ontario's 2012 Physician Assistant graduates are working in Ontario.
- Over 3000 employers and 30 organizations in Ontario are using HFOJobs for job postings.
- Continued to assist local hospitals and communities with emergency department staffing, averting service disruptions.
- Helped more than 400 internationally educated health professionals with re-training or beginning alternative careers.
- Supported communities with immediate access to health care by helping to relocate physicians to Ontario.
- Provided on-the-ground information and data to assist the Ministry of Health and Long-Term Care in health human resource planning.
- Through Practice Ontario, worked with medical schools to help retain Ontario's domestic physician supply.

The Ministry of Health and Long-Term Care very much appreciates and values the contributions of all those associated with HFO MRA, including the staff team, the Executive Director and Board. I look forward to continued work with HFO MRA in the upcoming year.

Sincerely,

S McGurn

Suzanne McGurn
Assistant Deputy Minister

c. Rosalind Smith, Executive Director, HFO MRA

HFO MRA is focused on building and maintaining the province's health human resources capacity.

HealthForceOntario Marketing and Recruitment Agency (HFO MRA/the Agency) arose out of the Government of Ontario's health human resources strategy. As an operational service agency, HFO MRA is focused on building and maintaining the province's health human resources capacity, leading to two categories of activity:

- Retention and distribution of Ontario's health professionals
- Recruitment and outreach to
  - *Internationally educated health professionals living in Ontario*
  - *Ontario's recruitment community*
  - *Practice-ready physicians living outside Ontario who are practising in high-need specialties*

Working with its partners – including communities, Local Health Integration Networks (LHINs), the Government of Ontario, recruiters, health professionals and a host of others – HFO MRA aims to achieve the vision of helping to ensure Ontarians have access to the right mix and number of health professionals, where and when they are needed.

Communities with physician shortages frequently face the challenge of maintaining clinical service. With the assistance of the Agency's locum programs, many communities are able to keep their Emergency Departments open as well as provide uninterrupted Family Medicine Physician services. In addition, communities in the North have access to locum specialist physicians who provide services in their hospitals and other organizations. Through physician vacancy and respite coverage, the Agency's locum programs play an important role in assisting with both the recruitment and retention of local physicians.

The Government of Ontario has invested resources in the education of health professionals, and wants these professionals to remain in Ontario to practise. The Agency provided client support for the Nursing Graduate Guarantee Management Module on HFOJobs, helping more than 15,000 new nursing graduates obtain jobs with participating health-care employers throughout the province in 2012/13. In addition, Practice Ontario provides Ontario post-graduate medical residents with transition to practice advice and job-search assistance, which has had a positive effect on the retention of domestically trained physicians. The Agency also administers the Physician Assistant Program to support members of this new profession in Ontario to find their first job.

In addition to retention, the Government, the Agency and **community recruiters** work towards a balanced distribution of health-care professionals across the province. The Health Professionals Recruitment Tour, a regional job fair, connects Ontario communities with many vacancies to medical residents, medical students, and other health professionals who are beginning their careers. In addition, the Agency supports medical residents who have a Return of Service contract with finding a high-need practice location.

The Agency's outreach and recruitment efforts help to bring more **health-care professionals** to the communities where they are most needed. HFO MRA offers practice-ready physicians in high-need specialties, who currently are not practising in Ontario, support in registration, certification, immigration and other aspects of relocation. Internationally educated health professionals (IEHPs) living in Ontario receive support to pursue a career in their regulated health profession within Ontario's health-care system.

The Agency's work helps to provide Ontarians with access to needed health-care services.

The following is a list of partners with which the Agency collaborated in 2012/13. These partners assist the Agency with the delivery of its programs and services:

- Academic Health Science Centres
- Canadian Resident Matching Service
- CARE Centre for Internationally Educated Nurses
- Centre for the Evaluation of Health Professionals Educated Abroad
- Community-based organizations
- Emergency Department LHIN leads
- Examination bodies
- Government of Ontario
- Health Canada
- Health-care bridge training
- Health-service providers across Ontario
- Health Human Resources recruiters
- Hospitals
- Local Health Integration Networks
- Long-Term Care Homes
- McMaster University Physician Assistant Program
- Medical Council of Canada
- Medical schools
- Municipal and community-based stakeholders
- Ontario Hospital Association
- Ontario Medical Association
- Ontario Psychiatric Outreach Program
- Ontario Telemedicine Network
- Post-graduate medical programs
- Primary care organizations
- Professional Association of Residents of Ontario
- Regulatory colleges
- Rural Ontario Medical Program
- Settlement agencies
- University of Toronto/Consortium Physician Assistant Program
- University of Toronto's Rural Northern Initiative

HealthForceOntario Marketing and Recruitment Agency has adopted the vision of the Government's health human resources strategy as its own: to ensure that Ontarians have access to the right number and mix of qualified health-care providers, when and where they are needed, now and in the future.

To facilitate organizational unity, HFO MRA has adopted Corporate Values intended to guide all Agency activities:

Client Centredness

i.e., Is the Agency department, program or service truly focused on the client?

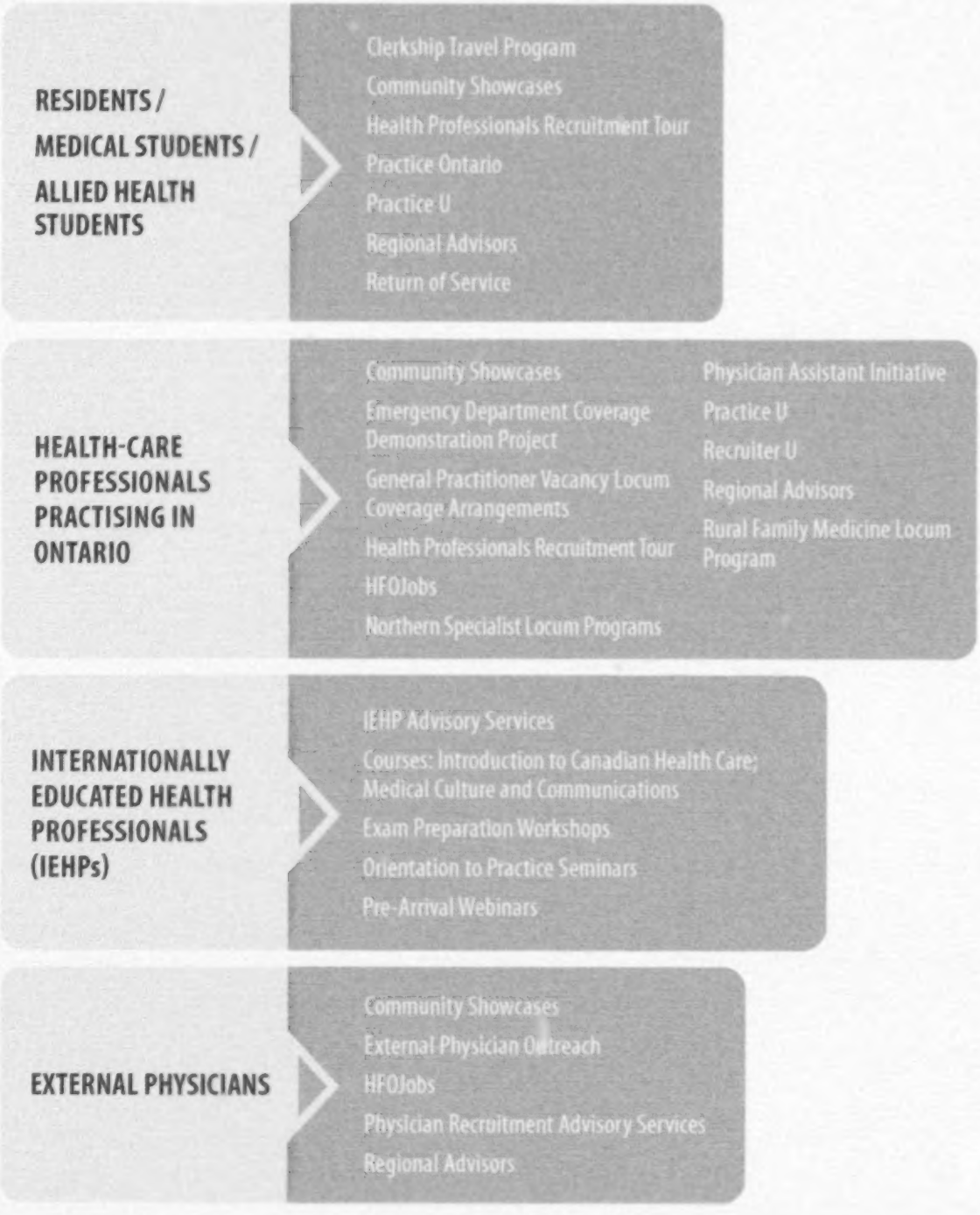
High-Quality Outcomes

i.e., Is the work being executed in a way that produces the best possible results?

Best Possible Return on Public Investment

i.e., Are the resources invested in the department, program or service in the most effective and efficient manner, with accountability in mind?

The Agency delivers a range of programs and services to serve the needs of various client groups. Many programs and services are accessed by more than one client group. (See visual.)



Current Programs and Services

Clerkship Travel Program

The Clerkship Travel Program covers select travel and accommodation expenses. Medical students (clerks) in the final two years of their program who are accepted for a clinical rotation at an Academic Health Science Centre more than 100 kilometres from their home school are eligible for the program. The program helps improve the distribution of physicians across Ontario by giving undergraduate medical students exposure to alternative practice settings.

Community Showcases

Community Showcases connect interested physicians from targeted specialties with job opportunities in Ontario communities that have high physician vacancies. Communities are identified and opportunities are showcased to physicians through webinars, e-communications, and other means.

Emergency Department Coverage Demonstration Project

The Emergency Department Coverage Demonstration Project (EDCDP) assists hospitals to avert closure of an Emergency Department due to physician unavailability. EDCDP provides urgent locum coverage as an interim measure of last resort to designated hospitals facing significant challenges covering Emergency Department shifts. Under EDCDP, physicians from Emergency Departments in Ontario who are able to maintain their home hospital commitments assist EDCDP hospitals in the province with coverage of Emergency Department shifts. At any given time, approximately 20 hospitals – those that have been assessed as most in need of staffing assistance – access EDCDP. Additionally, more than two-thirds of the hospitals in Ontario have received EDCDP advice regarding Emergency Department staffing, recruitment and retention, and sharing of best practices.

External Physician Outreach

External Physician Outreach supports qualified physicians in high-need specialties who are not practising in Ontario but have expressed an interest in relocating to the province. Currently, External Outreach targets U.S.-based physicians with specialties in: Family Medicine, Emergency Medicine, Psychiatry, and other high-need specialties. Outreach is conducted via webinars, e-mail campaigns, and the web site to generate interest from physicians best-suited to meet Ontario's needs.

General Practitioner Vacancy Locum Coverage Arrangements

The General Practitioner Vacancy Locum Coverage Arrangements (GPVLCA) provides vacancy locum coverage for high-need communities in Northern Ontario while they recruit for additional Family Medicine physicians. Thirteen communities receive varying levels of vacancy support from the GPVLCA in the areas of Family Medicine, Emergency Medicine and GP Anaesthesia.

Health Professionals Recruitment Tour

HFO MRA assumed responsibility for the Health Professionals Recruitment Tour (HPRT), a regional job fair at which Ontario communities with vacancies meet with medical residents, medical students, and other health professionals who are beginning their careers. Annually for more than 30 years, hundreds of recruiters and health-care professionals attend one or more of the seven regional events. HFO MRA conducted a comprehensive consultation with Ontario's health-care community to develop consensus on improving the value of the tour in the context of other recruitment initiatives offered by HFO MRA. While being responsive to communities' need for physicians, HFO MRA is also encouraging greater participation among allied health recruiters and professionals in 2013.

HFOJobs

HFOJobs is a comprehensive web-based portal that connects health-care organizations, communities and employers who have opportunities for physicians, nurses and new nursing graduates to candidates seeking employment. HFOJobs staff work with employer and community recruiters from across the province to help them create and manage job postings, as well as to maintain organization and community profiles on the site.

Internationally Educated Health Professionals Advisory Services

The Internationally Educated Health Professionals Advisory Services exist to support internationally educated health professionals (IEHPs) living in Ontario to pursue a career in Ontario's health-care system and to enable Ontario to make the best use of IEHPs in meeting the province's health human resources needs. The Agency provides advisory services to all 22 of Ontario's regulated health professions and nearly 75% of all IEHP clients are physicians. Staff work with clients on an individual basis using a case management approach to assess the client's professional background and current status, and develop an individualized action plan.

Northern Specialist Locum Programs

The Northern Specialist Locum Programs consist of two programs that support continuous patient access to specialist services in Northern Ontario. Northern Ontario communities with vacant specialist physician positions access the Urgent Locum Tenens Program to provide temporary specialist locum coverage while they look to recruit a permanent physician. For those Northern Ontario communities that have a full complement of specialist physicians, the Respite Locum Tenens Program provides temporary specialist locum coverage while local physicians are on vacation, continuing medical education or leave.

Physician Assistant Program

The Physician Assistant (PA) Program administers the PA Career Start program for graduates of Ontario's two PA education programs, and as of April 1, 2013, the PA Program will administer the PA demonstration project employment supports. It facilitates the employment of graduates in priority clinical and geographic areas through publicly funded employment supports.

Physician Recruitment Advisory Services

The Physician Recruitment Advisory Services assist practice-ready external physicians with relocation to Ontario and assist communities with external recruitment questions. Physician Recruitment Advisors provide registration, certification and immigration advice; coordination with key stakeholders (e.g. College of Physicians and Surgeons of Ontario, College of Family Physicians of Canada, Royal College of Physicians and Surgeons of Canada, Physician Credentials Registry of Canada); and information on a broad range of practice topics. Physician Recruitment Advisors also work with Canadians who are transitioning between medical school and residency in the U.S., many of whom return to Ontario to practise medicine after residency.

Practice Ontario

Practice Ontario is a service that helps Ontario post-graduate medical residents with their transition to practice across the province. Through Regional Advisors, and in conjunction with all six medical schools, Ontario post-graduate medical residents receive career counselling; assistance in identifying practice opportunities across the province; and information regarding resources, supports and incentives, individually and in groups. Practice Ontario aligns with the broader goal of keeping in the province the residents who attend medical school in Ontario.

Practice U

Written in collaboration with experts across Ontario's health-care sector, this online toolkit helps physicians prepare for professional practice in Ontario. Practice U modules include: The Business Side of Medicine; Physician Well-Being; Compensation and Incentives; Finding Your Ideal Practice; Physician Resources; Moving to Ontario; and Countdown to Practice.

Recruiter U

Recruiter U is an online toolkit that includes health-care recruitment and retention tools, tips, and topics developed by recruiters for recruiters. Topics on this virtual campus include: Customer Relationship Management; Marketing; Social Media; Working with the Media; Physician Recruitment and Retention; Locum Guidelines and Frequently Asked Questions for Recruiters; and Licensing and Supervision.

Regional Advisors

Regional Advisors are located across the province and have two key functions:

- To assist hospitals, employers and stakeholders with their community-based recruitment and retention initiatives. Advisors work one on one to connect health-care providers, organizations and resources to share best practices and assist with community and LHIN-based health human resources planning.
- To support residents, physicians, and their partners find suitable practice opportunities in Ontario through Practice Ontario, HFOJobs, and other means.

Return of Service

Through the HealthForceOntario Post-graduate Return of Service Program, the Ministry of Health and Long-Term Care funds post-graduate training and assessment of opportunities for international medical graduates in exchange for a commitment to provide five-years of full-time service in an eligible community in Ontario. All communities are eligible except the City of Ottawa and the Toronto Area (defined as the City of Toronto and neighbouring municipalities of Mississauga, Brampton, Vaughan, Markham and Pickering).

Rural Family Medicine Locum Program

The Rural Family Medicine Locum Program maintains ongoing primary care in eligible communities by providing temporary short-term replacement coverage for practising rural Family Medicine physicians.

"It has been fascinating to witness the remarkable strides the Agency has made in the way of integration over the past year. Our clients see us as 'problem solvers,' which I believe is the best praise we can receive as an Agency. HFO MRA is a part of the conversation and a contributor to the solution."

- Manager, Recruitment and Retention Programs

HIRE IEHP (HealthForce Integration, Research and Education for Internationally Educated Health Professionals)

The Ministry has partnered with the University of Toronto and HFO MRA to deliver HIRE IEHP. This project looks at ways in which practice site interventions (e.g. online prepatory programs, alternative career counselling) can be applied to support the integration of IEHPs into the workforce in Ontario.

This project has two phases:

- 2012/13: Phase 1: Design and Development - Includes a comprehensive needs assessment of potential interventions and looks at repurposing existing or previously used interventions.
- 2013/14: Phase 2: Implementation of Practice Site Interventions and Analysis, Evaluation and Dissemination.

Phase 1 was funded by Health Canada and is now complete. A proposal for Phase 2 work has been submitted to Health Canada and is under review.

Five Client Groups HFO MRA Serves:

Residents/Medical Students/ Allied Health Students

Health-Care Professionals Practising in Ontario

External Physicians

Internationally Educated Health-Care Professionals (IEHPs)

Communities

Residents/Medical Students/ Allied Health Students

Resident Testimonial, Agency Accomplishments

"HealthForceOntario Marketing and Recruitment Agency (HFO MRA) provides an excellent service to the health-care professionals of Ontario. From the start of my career in Canada, I was directed on the correct path, and HFO MRA was able to guide me through all the steps to becoming a registered physician in Ontario. I felt supported. After completing my residency, HFO MRA then supported me while I was navigating my way through establishing a practice and trying to figure out where I wanted to work. Now, whenever I speak to health-care professionals who need assistance in terms of understanding the system, I advise them to contact HFO MRA."

- Dr. Deema Abdulhadi
Family Physician and Lecturer, University of Toronto, Department of Family and Community Medicine

---

Agency Accomplishments – Residents/Medical Students/Allied Health Students

- The Regional Advisors and Physician Recruitment Advisors assisted in filling 468 physician job opportunities, 66% of which were in communities eligible for recruitment incentives and 76% of which were in high-need specialties (e.g. Family Medicine, Emergency Medicine, Psychiatry).
- 223 clinical clerks received reimbursement of select travel and accommodation expenses for spending at least two weeks at an Academic Health Science Centre that was more than 100 kilometres from their medical school. Exposure to different communities while attending medical school increases the likelihood of the physicians eventually practising in those communities.
- The province invested in the education of the 35 Physician Assistants who graduated in 2012. Thirty have accepted positions, some of which are located in Northern and rural areas, within the Government grant initiative.
- In 2012, HFO MRA administered its first Health Professionals Recruitment Tour. The tour visited all seven academic health centres in Ontario where nearly 1,000 students, residents and practising health professionals were connected with more than 100 underserviced communities and recruitment organizations. Feedback from learners and recruiters has been very positive.

"Practice Ontario is now fully integrated into all medical schools in Ontario. I believe the strong partnerships that currently exist with each medical school in the province will continue to strengthen and help to retain our domestically trained graduates."

- Regional Advisor, Recruitment and Retention Programs

Health-Care Professionals Practising in Ontario

Health-Care Professional Success Story

Drs. Jennifer Barthel and William Doelman: Locuming throughout Ontario Offers a Breadth of Experience

Back in 2010, Drs. Jennifer Barthel and William Doelman were residents in Family Medicine at Queen's University and starting to consider their future. While the married couple was doing a residency elective in the Hamilton area, they decided to attend the Health Professionals Recruitment Tour (HPRT) in Hamilton. At the HPRT, they collected information on HFO MRA's Rural Family Medicine Locum Program (RFMLP) and also met with a number of community recruiters.

When they finished residency in 2011, Drs. Barthel and Doelman decided they would prefer to locum rather than establish a Family Medicine practice right away. "We wanted to travel to different places and to get exposure to different practice styles," Dr. Doelman says. They also wanted flexible schedules; Dr. Barthel's family lives in British Columbia and locuming would give them the freedom to work for a while and then take time off to visit family.

Through the connections they made at HPRT, Drs. Barthel and Doelman contacted various communities and began locuming through the RFMLP and other programs. To date, they have locumed in Kirkland Lake, Sioux Lookout, Southampton, Port Elgin, and Chatham. The couple typically does locums together, providing both office practice and Emergency Department coverage for a month or two at a time. Their experience with the RFMLP Operations Coordinators and community administrators has been positive. "There is paperwork involved in setting up a locum, and they have always gotten back to us quickly," notes Dr. Barthel.

Drs. Barthel and Doelman plan to continue locuming for a few years. They also are registered to practice in British Columbia, and plan to do some locums there. Eventually, though, they would like to choose a community and establish a Family Medicine practice. Their exposure to different communities and practice settings will help them select where they would like to work in the future.

Drs. Barthel and Doelman encourage other Family Medicine physicians to consider locuming. It provides great experience and ideas new physicians can use when they set up their own practices. And it benefits communities that need physician coverage. "The communities and local doctors are always very appreciative of us," says Dr. Doelman.

Agency Accomplishments – Health-Care Professionals Practising in Ontario

- Through HFOJobs, 3,371 employers and organizations in 332 communities posted vacancies for 709 specialists, 2,856 Family Medicine physicians, 2,187 nurses and 1,433 new Graduate Guarantee positions. 1,543 physicians, 2,797 nurses and 5,129 new graduate nurses viewed these positions.
- While 235 of their local physicians were on continuing education, vacation or other leave, 74 rural communities accessed 221 locum Family Medicine physicians to fill in for 4,965 days through the Rural Family Medicine Locum Program (RFMLP).
- Through the General Practitioner Vacancy Locum Coverage Arrangements (GPVLCA), 13 Northern communities received Family Medicine, Anaesthesia, and Emergency Medicine services for 2,609 days from 131 locum Family Medicine physicians.
- Through the Northern Specialist Locum Programs (NSLP), 370 specialist physicians travelled to 15 Northern hospitals to provide 8,340 days of locum coverage across 28 different medical specialties.
- By providing more than 26,000 hours of urgent physician coverage to 21 hospitals, the Emergency Department Coverage Demonstration Project (EDCDP) contributed significantly to averting 84 Emergency Department closures in Ontario. Averting a closure is defined as successfully obtaining coverage for an open Emergency Department shift in four days or less prior to the shift.
- By sharing strategic consultation to 39 Emergency Departments in the province, EDCDP significantly reduced or eliminated the need to access urgent locum physicians.
- Of the 21 hospitals that received physician coverage support through EDCDP in 2012/13, four have since recruited, regained ED coverage self-sufficiency, and concluded their reliance on EDCDP locum assistance.

Dr. Brian McPherson – Australian Physician Beginning Family Medicine Practice in Kirkland Lake

Dr. Brian McPherson was practising in a rural community in Australia when he first contacted HFO MRA by e-mail in May 2011. He had learned the College of Family Physicians of Canada (CFPC) recognized Australian GP training programs, and expressed his interest in relocating to Ontario. Dr. McPherson was connected with an Advisor who provided information and guided him through the Physician Credentials Registry of Canada (PCRC), College of Family Physicians of Canada (CFPC), and College of Physicians and Surgeons of Ontario (CPSO) application processes. In addition, his Advisor notified him about job postings that fit with his personal and professional preferences.

Two of the Agency's Regional Advisors played a key role in coordinating Dr. McPherson's January site visits to several Northern Ontario communities. From organizing welcome dinners with town physicians to snowmobile rides, the communities were extremely welcoming.

Once Dr. McPherson chose the community of Kirkland Lake, the local recruiter looked after community requirements (housing, schools, etc.) to make the recruitment a success. Dr. McPherson's Advisor worked with Kirkland Lake's recruiter to confirm a supervision proposal was drafted for the CPSO application and to answer any questions about Dr. McPherson's route to registration. The community recruiter also worked with the Agency's Immigration Specialist on the Labour Market Opinion application, which supported Dr. McPherson in applying for a work permit. Additionally, the Immigration Specialist helped guide Dr. McPherson through completing the work permit application.

Dr. McPherson began practising in Kirkland Lake in July 2012. Kirkland Lake is an underserviced community that has been actively recruiting Family Medicine physicians for some time. The community is very pleased to have recruited Dr. McPherson.

Agency Accomplishment – External Physicians

- In 2012, the Physician Recruitment Advisory Service and Regional Advisors assisted with the relocation of 162 physicians to the province, a record yearly total. The majority of these clients were in priority specialties (Family Medicine, Psychiatry and Emergency Medicine) and are practising in communities with shortages in these specialties.

"The assistance provided to external physicians truly represents a collaborative effort among Physician Recruitment Advisors, Regional Advisors, community and organization recruiters, and stakeholders such as the College of Physicians and Surgeons of Ontario and the College of Family Physicians of Canada."

– The Physician Recruitment Advisor Team

Ming Li – International Medical Graduate from China Practising as a Physician Assistant in Timmins

Ming Li made initial contact with the Access Centre in 2008. At the time, she enquired about the registration process in Ontario and other exam preparation support. She also was investigating volunteer and clinical practice opportunities. Her Agency IEHP Advisor helped her to develop an action plan to successfully complete her medical examinations and apply to the Canadian Resident Matching Service for entry into post-graduate medical training.

Although Li was not successful in her bid for residency in 2010, she was determined to pursue a career in health care. She began to explore other options and shortlisted two choices: Medical Laboratory Technology at The Michener Institute and the Physician Assistant (PA) Program at McMaster University.

Li worked diligently to develop a strong portfolio for both programs. Once her applications were submitted, she prepared for the multiple mini interviews with her Advisor. Her hard work paid off; Li was offered positions in both programs and decided to pursue a career as a Physician Assistant. She successfully completed the PA program in November 2011.

With further assistance from HFO MRA, she enhanced her employment documents and worked closely with the PA Program's Project Lead to secure her first full-time position through the PA Employment Support Grant.

Seven months into her new role, Li has quickly become an integral part of the health-care team at Timmins and District Hospital. "I love it. I get to do so much. When I first started, I took care of long-term patients. Now, I am doing new admissions and carry a patient load of 10," says Li.

Li recently bought a house in the Timmins area and is enjoying the quiet Northern Ontario lifestyle. She is thrilled to be providing health-care services to a Northern Ontario community.

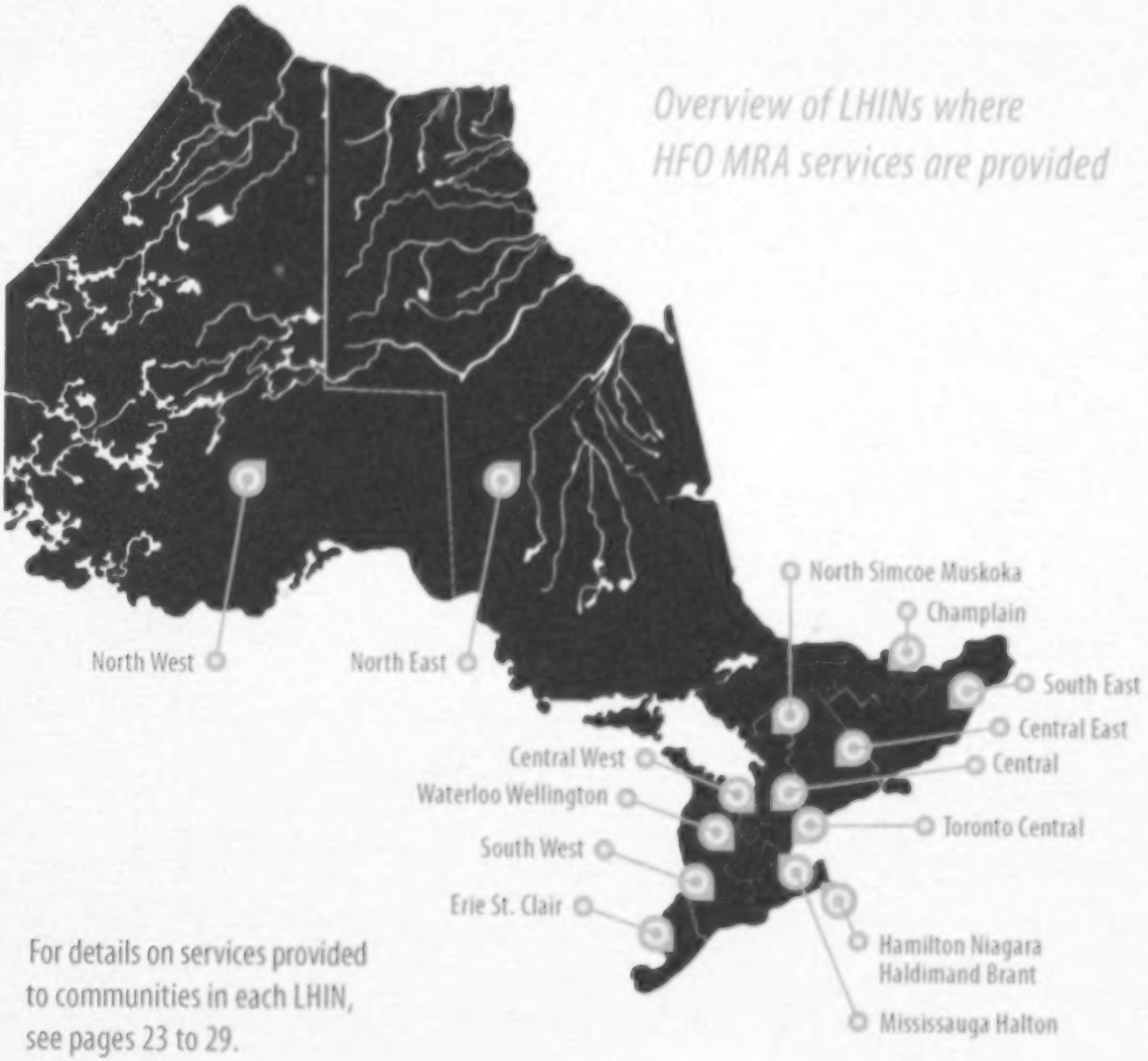
Agency Accomplishment – Internationally Educated Health Professionals

- In 2012, the Agency had 427 successful internationally educated health professional (IEHP) clients either re-train and then register with their respective regulatory college, or begin an alternative career. These successes include 291 international medical graduate clients, who successfully entered a residency training program in North America. Once these clients complete their required training programs and certification, they are qualified to practise medicine in the jurisdiction of their certification.

"In the summer of 2012, HFO MRA celebrated its 1,000th international medical graduate client entering medical residency, the biggest hurdle to becoming a practising physician in North America. These doctors from so many different countries have all worked so hard to reach this goal. We are extremely proud to have helped them succeed and to have helped more Ontarians receive health care in their community."

- IEHP Program Manager, Access Centre

Overview of LHINs where HFO MRA services are provided



For details on services provided to communities in each LHIN, see pages 23 to 29.

Legend *(for pages 23 to 29)*

Internal Physicians: Domestically trained physicians

ROS: Return of Service physicians

External Physicians: A physician who is (or was) in training or practice outside of Ontario and is/will be eligible for registration with the College of Physicians and Surgeons of Ontario

RA: Regional Advisor

IEHP: Internationally Educated Health Professional

IMG: International Medical Graduate

EDCDP: Emergency Department Coverage Demonstration Project

GPVLCA: General Practitioner Vacancy Locum Coverage Arrangements

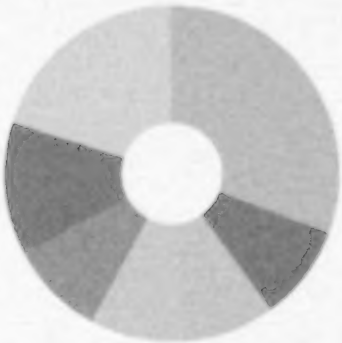
NSLP: Northern Specialist Locum Programs

RFMLP: Rural Family Medicine Locum Program

PA: Physician Assistant

HFOJobs: Online physician and nurse job portal

Central



- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs

Services in Each Community:

- Alliston
- Aurora
- Bradford
- East Gwillimbury
- Georgina
- Keswick
- King City
- Markham
- Newmarket
- North York
- Richmond Hill
- Stouffville
- Sutton
- Thornhill
- Tottenham
- Unionville
- Vaughan
- West Gwillimbury
- Woodbridge

Central East

- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- RFMLP
- EDCDP
- PA

Services in Each Community:

- Ajax
- Apsley
- Beaverton
- Bobcaygeon
- Bowmanville
- Brock Township
- Brooklin
- Campbellford
- Cannington
- Clarington
- Cobourg
- Courtice
- Fenelon Falls
- Haliburton
- Hastings
- Havelock
- Kawartha Lakes
- Kinmount
- Lindsay
- Millbrook
- Minden
- Newcastle
- Northhumberland County
- Norwood
- Omemee
- Oshawa
- Peterborough
- Pickering
- Port Hope
- Port Perry
- Scarborough
- Sunderland
- Uxbridge
- Warkworth
- Whitby
- Wilberforce

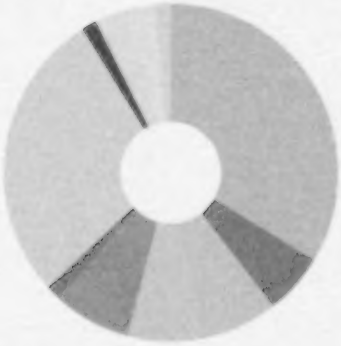
Central West

- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- RFMLP
- IMGs in Residency Training

Services in Each Community:

- Bolton
- Brampton
- Caledon
- Malton
- Orangeville
- Shelburne

Champlain

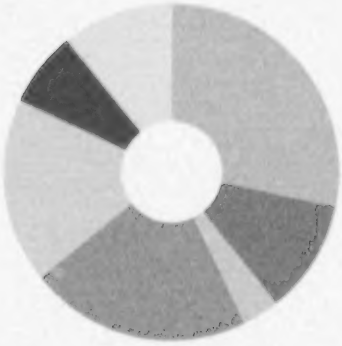


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- EDCDP
- RFMLP
- PA
- IMGs in Residency Training

Services in Each Community:

- Alexandria
- Almonte
- Amprior
- Barrhaven
- Barry's Bay
- Calabogie
- Carleton Place
- Casselman
- Cornwall
- Deep River
- Embrun
- Hawkesbury
- Kanata
- Kemptville
- Lancaster
- Manotick
- Morrisburg
- Nepean
- Ottawa
- Pembroke
- Petawawa
- Plantagenet
- Prescott & Russell
- Renfrew
- Russell
- Township of Rideau Lakes
- Whitewater
- Winchester

Erie St. Clair

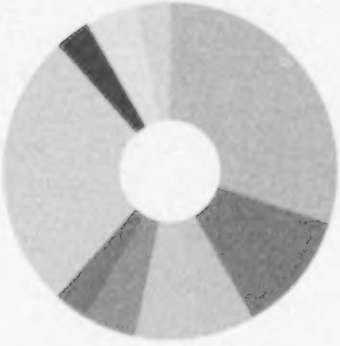


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians w/ ROS Practising
- External Physician Successes
- HFOJobs
- EDCDP
- PA

Services in Each Community:

- Blenheim
- Chatham
- Dresden
- Leamington
- Petrolia
- Point Edward
- Sarnia
- Tecumseh
- Wallaceburg
- Windsor

Hamilton Niagara Haldimand Brant

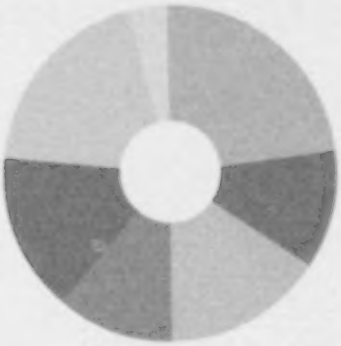


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- EDCDP
- PA
- IMGs in Residency Training

Services in Each Community:

- Beamsville
- Brantford
- Burlington
- Cayuga
- Dunnville
- Fort Erie
- Grimsby
- Hagersville
- Hamilton
- Niagara
- Niagara Falls
- Niagara-on-the-Lake
- Ohsweken
- Paris
- Port Colborne
- Port Dover
- Simcoe
- Smithville
- St. Catharines
- Stoney Creek
- Welland

Mississauga Halton

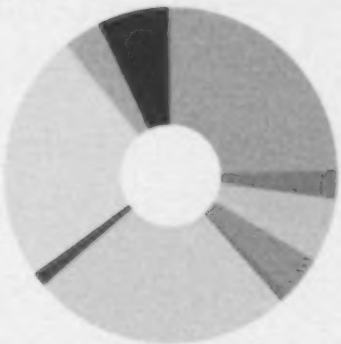


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- PA

Services in Each Community:

- Etobicoke
- Georgetown
- Halton Hills
- Milton
- Mississauga
- Oakville
- Port Credit

North East

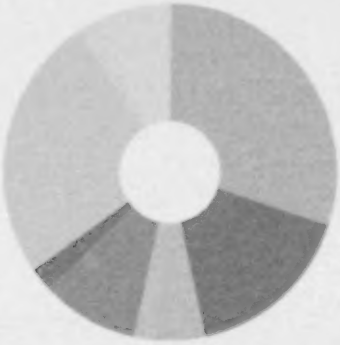


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- EDCDP
- RFMLP
- IMGs in Residency Training
- GPVLCA
- NSLP

Services in Each Community:

- Blind River
- Bruce Mines
- Burk's Falls
- Chapleau
- Cobalt
- Cochrane
- Earlton
- Elliot Lake
- Englehart
- Espanola
- Gore Bay
- Haileybury
- Hearst
- Hornepayne
- Iroquois Falls
- Kirkland Lake
- Latchford
- Levack
- Little Current
- Manitowaning
- Massey
- Matheson
- Mattawa
- Mindemoya
- Moose Factory
- New Liskeard
- North Bay
- Parry Sound
- Powassan
- Richards Landing
- Smooth Rock Falls
- South River
- Spanish
- Sturgeon Falls
- Sudbury
- Sundridge
- Temagami
- Temiskaming Shores
- Thessalon
- Timmins
- Wawa
- West Nipissing
- White River
- Whitney
- Wikwemikong

North Simcoe Muskoka

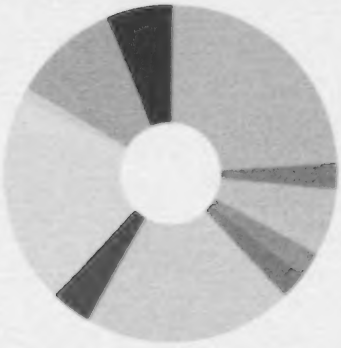


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- RFMLP
- PA

Services in Each Community:

- Barrie
- Borden
- Bracebridge
- Clearview
- Collingwood
- Gravenhurst
- Huntsville
- Innisfil
- Midland
- Minesing
- Orillia
- Oro-Medonte
- Penetanguishene
- Port Carling
- Port Severn
- Wahta Mohawk Territory
- Wasaga Beach

North West

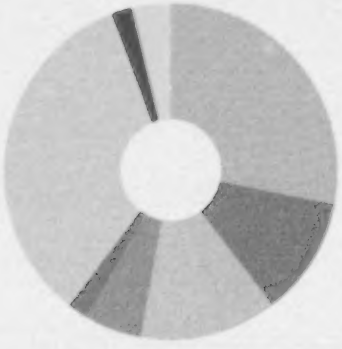


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- EDCDP
- RFMLP
- PA
- IMGs in Residency Training
- GPVLCA
- NSLP

Services in Each Community:

- Atikokan
- Beardmore
- Dryden
- Ear Falls
- Emo
- Fort Frances
- Geraldton
- Ignace
- Keewatin
- Kenora
- Longlac
- Manitouwadge
- Marathon
- Nipigon
- Rainy River
- Red Lake
- Schreiber
- Sioux Lookout
- Terrace Bay
- Thunder Bay

South East

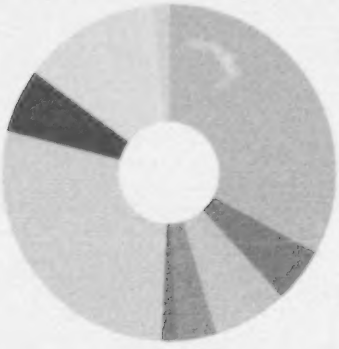


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- EDCDP
- RFMLP

Services in Each Community:

- Bancroft
- Belleville
- Brighton
- Brockville
- Gananoque
- Glenburnie
- Kingston
- Lennox/ Addington County
- Maple
- Marmora
- Merrickville
- Napanee
- Northbrook
- Perth
- Picton
- Prince Edward County
- Quinte West
- Seeley's Bay
- Smiths Falls
- Trenton
- Tweed

South West

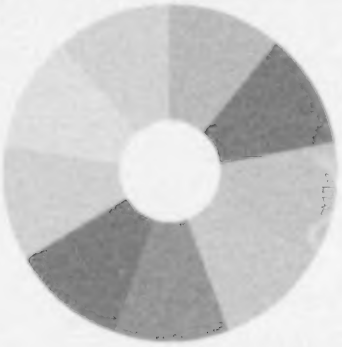


- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- EDCDP
- RFMLP
- PA
- IMGs in Residency Training

Services in Each Community:

- Alymer
- Bayfield
- Blue Mountains
- Brockton
- Chesley
- Clarksburg
- Clinton
- Durham
- Dutton
- Exeter
- Flesherton
- Goderich
- Grand Bend
- Hanover
- Ingersoll
- Kincardine
- Lion's Head
- Listowel
- London
- Lucknow
- Markdale
- Meaford
- Midmay
- Minto
- Mitchell
- Newbury
- North Perth
- Norwich
- Owen Sound
- Parkhill
- Port Elgin
- Saugeen Shores
- Seaforth
- Southampton
- St. Marys
- St. Thomas
- Stratford
- Strathroy
- Tavistock
- Teeswater
- Thamesford
- Thornbury
- Thorndale
- Tillsonburg
- Walkerton
- West Lorne
- Wiarton
- Wingham
- Woodstock
- Zurich

Toronto Central



- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- PA
- IMGs in Residency Training

Services in Each Community:

- Toronto

Waterloo Wellington

- RA Community Assistance
- Internal Physicians (non-ROS) Practising
- Internal Physicians (non-ROS) Locuming
- Internal Physicians w/ ROS Practising
- External Physician Successes
- Allied IEHP Successes
- HFOJobs
- RFMLP
- PA

Services in Each Community:

- Ayr
- Cambridge
- Drayton
- Elora
- Erin
- Fergus
- Galt
- Guelph
- Harriston
- Kitchener
- Mount Forest
- New Hamburg
- Palmerston
- Rockwood
- St. Jacobs
- Waterloo
- Wellesley
- Woolwich Township

For examples of how HFO MRA works with communities, please read the Chatham, Kitchener-Waterloo and Thunder Bay community profiles on pages 31-37.

"Since the inception of EDCDP, Southampton has been considered one of the most dire-need EDs in the province and EDCDP supported them while the site pursued all recruitment avenues. As of March 31, 2013, the Southampton site achieved ED self-sufficiency and no longer needs to participate in the EDCDP. It is a proud achievement to have helped a community in need become self-sustainable in the ED."

- Operations Coordinator, EDCDP

"EDCDP helped us find the coverage we needed to avoid closure."

– Jessica Letourneau, Director, Medical Affairs, Chatham-Kent Health Alliance

The Chatham Public General Hospital Emergency Department Realizes Results by Improving Its Schedule and Focusing on Recruitment

The Chatham site of the Chatham-Kent Health Alliance (CKHA) is an important Emergency Department (ED) hub, the largest site on Highway 401 between London and Windsor. The Chatham ED has been chronically understaffed for physicians since before the site began participating in the Emergency Department Coverage Demonstration Project (EDCDP) in March, 2007. The staffing issue became acute in the spring of 2012 when several local physicians significantly reduced their hours in the ED.

To respond to the immediate issue, EDCDP worked with the hospital to increase locum support to the site, tripling EDCDP coverage between May and June of 2012. "EDCDP helped us find the coverage we needed to avoid closure," says Jessica Letourneau, Director, Medical Affairs, at CKHA.

At the same time, EDCDP began to strategize with the hospital, physician group and Erie St. Clair (ESC) ED LHIN Lead about a long-term sustainable solution for the Chatham ED. The staffing/scheduling model was identified as an underlying factor depressing the ED's recruitment and retention value.

In the context of an ongoing physician shortage, the existing scheduling model was developed to maximize the coverage capacity of the physician group and reduce risk of ED closure. However, this challenging schedule was unattractive to potential recruits and, after years of being chronically understaffed, the dedicated local group was under significant strain.

EDCDP and the physician group worked together to devise an ED schedule for Chatham that was more appropriate and sustainable relative to the volume and acuity of the site, scheduling two ED physicians through all the peak periods of the day. The new schedule supported the retention of local ED physicians and created a staffing model that would be attractive from a recruitment perspective; however, to implement the new schedule, CKHA would require increased locum support. Again, EDCDP worked with the hospital to enhance locum support, giving Chatham the assurance to take this necessary step. By August of 2012, EDCDP coverage in Chatham had increased to seven times the coverage provided in May (representing more than 30% of all Chatham hours). The new schedule was widely appreciated by the local and locum physicians alike. "The double shift increases safety for physicians and patients, and improves the flow of volume through the ED," Letourneau says.

Having addressed the underlying scheduling issue via stop-gap support from EDCDP, the challenge became to recruit full-time ED physicians to the department and set Chatham on the road to self-sufficient ED staffing. In the fall of 2012, the CKHA team implemented a robust recruitment strategy supported by the ESC LHIN, ED LHIN Lead, EDCDP and HFO MRA Regional Advisor.

"We've been challenged with this issue for seven-plus years; everyone is determined to make a positive change," says Fannie Vavoulis, Medical Recruiter & Education Coordinator, CKHA. The HFO MRA Regional Advisor has been very involved in the recruitment strategy, sending candidates to Vavoulis, taking an active role on the Recruitment and Retention Committee at the hospital, and keeping the community informed about Ministry programs or resources for which it may qualify.

The strategy realized early success as the hospital entered into discussions with a recent FRCP (EM) graduate in October 2012. The physician required guidance through the CPSO registration process due to changes in the requirements for a certificate of registration, which impacted his ability to qualify for registration. Vavoulis turned to the Physician Recruitment Advisor (PRA) Team Lead at HFO MRA for advice. The PRA Team Lead worked with the physician, the CPSO and Vavoulis to address the situation. By maintaining open lines of communication, the PRA Team Lead's efforts helped the physician's application secure a place at the CPSO Registration Committee meeting in a timely fashion. The physician was approved for a certificate of registration and began practising part-time in the CKHA Emergency Department in February 2013. "He has relieved pressure off the other physicians and he has an enormous amount of knowledge about ultrasound, which is widely appreciated," Vavoulis says.

Thanks to the coordinated efforts of the physician group, the hospital, HFO MRA, and the LHIN, the community has been able to begin on a path to sustainability. "It goes to show what working with partners can accomplish," Vavoulis says.

By the numbers

In 2012/13:

- *3,208 hours of coverage were provided through EDCDP to the Chatham ED.*
- *One internal physician client was recruited to Chatham and is practising Emergency Medicine.*
- *Five external physician clients were recruited to Chatham and are practising Family Medicine (two physicians), Obstetrics/ Gynecology, Anesthesia, and Psychiatry.*
- *The community of Chatham posted 18 Family Medicine positions, 15 specialist positions, 16 nursing positions, four of which were Nurse Graduate Guarantee positions on HFOJobs.*

Kitchener-Waterloo and HFO MRA Work Together to Recruit Physicians in High-Need Specialties; International Medical Graduates and External Physicians Part of the Solution

Physician recruitment in high-need specialties, such as Family Medicine and Psychiatry, is a priority for the Kitchener-Waterloo community. HFO MRA worked closely with the community in 2012/13 to help recruit six Family Medicine physicians and three Psychiatrists to the community.

Back in 1998, 40,000 Kitchener-Waterloo residents were without a Family Medicine doctor. Though the community has had great success in recruiting Family Medicine physicians during the past 15 years – reducing the number of residents needing a family doctor to 20,000 – recruitment needs to continue, especially as some of the community's Family Medicine physicians are reaching retirement age and the population of the community is growing.

"The recruitment of the six Family Medicine physicians will have a big impact on the community," says Mary Sue Fitzpatrick, Vice-President, Family Physician Resources, Greater Kitchener Waterloo Chamber of Commerce. Recognizing that roster size varies by individual physician, the average enrollment for a physician in a Patient Enrollment Model is 1,240 according to the Primary Health Care Branch of the Ministry. So the recruitment of six Family Medicine physicians could potentially result in 7,440 Kitchener-Waterloo residents getting a Family Medicine doctor.

Recruitment is a cooperative effort. Fitzpatrick is in regular contact with the Waterloo-Wellington Regional Advisor, who refers potential Family Medicine physician recruits interested in working in the area to Fitzpatrick. The Regional Advisor also attends a Family Resident weekend the community hosts each November. "The Regional Advisor is very engaged in recruitment in our area," Fitzpatrick says.

One of the Family Medicine physicians recruited was an HFO MRA international medical graduate (IMG) client, who had successfully matched to residency and had a Return of Service (ROS) contract. (Kitchener-Waterloo is an ROS-eligible community.) The physician worked with an IEHP Advisor at HFO MRA on interview skills, while the Regional Advisor assisted with transition to practice and job-search advice.

In addition to Family Medicine physicians, Kitchener-Waterloo has a need for Psychiatrists. Grand River Hospital in Kitchener-Waterloo has the equivalent of 15 full-time Psychiatrists on staff. In 2012/13, three Psychiatrists who were HFO MRA external physician clients joined Grand River Hospital in Kitchener-Waterloo.

Two of the Psychiatrists joined the specialized in-patient mental health program at the Freeport site. Previously the site was only staffed at 2/3 capacity with four Psychiatrists. "The addition of these two new Psychiatrists means we have a full complement now and can bring the number of beds [50] up to full capacity," says Dr. John Heintzman, Chief of Psychiatry, Grand River Hospital.

The third Psychiatrist works in the Child and Adolescent Inpatient Program at the acute site. The hospital's intention is to recruit two more Child and Adolescent Psychiatrists to expand service.

The Physician Recruitment Advisors provided advice and assistance regarding the route to registration and immigration to these Psychiatrists, while the Regional Advisor provided job-search assistance to the Psychiatrist working in the Child and Adolescent Inpatient Program at Grand River Hospital. "The out-of-country physicians often don't know Ontario. The service HFO MRA provides is very valuable in guiding these physicians through registration and making them aware of all the opportunities in Ontario, which is especially helpful for smaller communities that don't have a huge recruitment budget," Dr. Heintzman notes.

"HFO MRA has been really helpful in securing specialists for the hospitals. Their expertise with immigration, licensing and general information about the community has been very valuable for the specialists relocating to Ontario. It is a pleasure to work with such a knowledgeable and friendly team."

- Dr. Ashok Sharma, Chief of Staff, Grand River and St. Mary's General Hospital

By the numbers

In 2012/13:

- *Six external physician clients were recruited to Kitchener-Waterloo and are practising in Psychiatry, Internal Medicine and Family Medicine.*
- *Three internal Return of Service physician clients were recruited to Kitchener-Waterloo and are practising in Family Medicine and Radiation Oncology.*
- *Three internal physician clients were recruited to Kitchener-Waterloo and are practising in Family Medicine and Internal Medicine.*
- *Two internal physician clients were recruited to New Hamburg and Woolwich and are practising Family Medicine.*
- *One IEHP client (a Pharmacist) is now practising in Kitchener-Waterloo.*
- *Kitchener-Waterloo posted 16 Family Medicine positions, 12 specialist positions, 35 nurse positions and 66 Nursing Graduate Guarantee positions on HFOJobs.*

"Any time we fill a vacancy, it increases access to specialists and improves continuity of care, wait times and access to hospital services."

- Linda Molenda, Physician Recruitment Assistant, Thunder Bay Regional Health Sciences Centre

HFO MRA Working in Partnership with Thunder Bay to Address a Physician Shortage

Thunder Bay is a community that faces a physician shortage. Though the North has much to offer to physicians, recruitment can be challenging. "I think there is still a perception out there about living in the North and cold winters. We are so much more than winter. Thunder Bay has everything a larger urban community has, just on a smaller scale. In saying that, we are very aware that living in the North is a lifestyle. It's about finding the right fit," says Linda Molenda, Physician Recruitment Assistant for the Thunder Bay Regional Health Sciences Centre (TBRHSC). To help address the physician shortage, HFO MRA and the community have been working together to maintain clinical care and recruit physicians.

HFO MRA's Northern Specialist Locum Programs (NSLP) help to maintain services in a number of specialties at the TBRHSC, the regional trauma centre and only Northern urban referral centre in the North West LHIN. "Being able to access the NSLP locums has been vital to Thunder Bay Regional. We have and continue to have locum needs in some of our essential services," Molenda says. During 2012/13, TBRHSC accessed 17 different medical specialties through NSLP.

While locuming provides essential physician coverage, it also can be an effective recruitment vehicle for a community. In 2012/13, four specialist physicians – in Obstetrics/Gynecology (OB/GYN), Nephrology, Diagnostic Imaging, and Nuclear Medicine – who had locumed with NSLP previously were recruited as permanent staff to TBRHSC. "Any time we fill a vacancy, it increases access to specialists and improves continuity of care, wait times and access to hospital services," Molenda notes.

Successful specialist recruitment has reduced TBRHSC's need for NSLP locum support. In 2009/10, Thunder Bay used more NSLP locum days than any other community on the program; in 2012/13, its usage had decreased by 47%. The successful recruitment of the OB/GYN and Nuclear Medicine NSLP locums in 2012 reduced locum usage in these specialties by more than 50% in comparison to 2011. TBRHSC has stated it is working towards becoming locum-independent for vacancies in the next few years by continuing to focus on recruitment.

Two factors, in particular, support Thunder Bay's recruitment efforts. First, TBRHSC is an Academic Health Science Centre affiliated with the Northern Ontario School of Medicine (NOSM) and the Thunder Bay Regional Research Institute. TBRHSC's ability to offer physicians research and teaching opportunities has helped recruitment efforts. The North West Regional Advisor at HFO MRA works closely with Molenda on recruiting specialists.

"There is always the optimism that medical students and residents that train in the North will stay in the North, and they often do."

- Linda Molenda, Physician Recruitment Assistant, Thunder Bay Regional Health Sciences Centre

The other factor is having medical residents in a community. "There is always the optimism that medical students and residents that train in the North will stay in the North, and they often do," Molenda says. In 2012, three of the Agency's international medical graduate clients successfully matched to residency in Family Medicine at NOSM's Thunder Bay campus.

When Regional Advisors work with medical residents in a particular area, they can often help them find local practice opportunities. Regional Advisor presentations to NOSM residents resulted in 24 new residents at the NOSM Thunder Bay campus registering with Practice Ontario.

The Regional Advisor also worked with NOSM to create space on the Thunder Bay and Sudbury campuses to meet with medical residents as part of their academic days, and now has one-on-one consultations with residents on campus once a month. Additionally, the Regional Advisor had a booth at the NOSM Resident Retreat in Thunder Bay.

Sometimes physicians outside the country or province express interest in practising at TBRHSC, but initially are not eligible to practice in Ontario. In many cases, Molenda refers these physicians directly to the Physician Recruitment Advisor (PRA) team at HFO MRA for guidance through the CPSO registration process and sends their CVs to the PRAs for an opinion on what options they have for registration. "The regulations around obtaining a certificate of registration in Ontario are ever changing, and staying current on those changes can be a challenge. The PRAs at HFO MRA provide an invaluable service to both physicians and physician recruiters, assisting us with navigating a sometimes complex and overwhelming process," Molenda says.

Finally, when allied health professionals are recruited to a community, they can help relieve a physician's workload. For example, a Physician Assistant started working in the Emergency Department (ED) at TBRHSC in January 2013. He primarily works in the Rapid Assessment Zone of the ED. "He supports the physician by doing initial assessments to identify potential patient issues and concerns in preparation for the physician exam," explains Lisa Beck, Director, Trauma Program, Critical Care & Emergency Services at TBRHSC. He also provides re-assessments to confirm ordered interventions are completed and assists in developing a plan of care for the patient. This role is being supported for two years by a 2012 Physician Assistant Employer Support Grant Program, which the Agency administers. Similarly, with pharmacists' recent expanded scope of practice, they are able to alleviate the workload of Family Medicine physicians. In 2012/13, an IEHP pharmacist client was recruited to Thunder Bay.

A physician shortage still exists in Thunder Bay, but the extensive partnership between the community and the Agency continues to result in continuity of care and recruitment success.

By the numbers

In 2012/13:

- *Four specialist physicians who locumed through NSLP were recruited to Thunder Bay.*
- *One internal physician client was recruited to Thunder Bay and is practising Family Medicine.*
- *One Return of Service physician client was recruited to Thunder Bay and is practising Family Medicine.*
- *One external physician client was recruited to Thunder Bay and is practising Anaesthesiology.*
- *24 new residents registered with Practice Ontario at the Northern Ontario School of Medicine (NOSM) Thunder Bay campus.*
- *Three IMG clients with a Return of Service were matched to residency in Thunder Bay.*
- *Two IEHP clients (a dentist and a pharmacist) are now practising in Thunder Bay.*
- *One Physician Assistant role is being supported for two years by a 2012 Physician Assistant Employer Support Grant Program, which the Agency administers.*
- *The community of Thunder Bay posted 33 Family Medicine positions, 13 specialist positions, six nurse positions, and 16 Nursing Graduate Guarantee positions on HFOJobs.*

2012/13 HFO MRA Performance Results

Core Business	Strategic Directions	Performance Indicators
Retention/ Distribution **Outreach/ Recruitment** **Accountability/ Transparency**	Expand Practice Ontario, a career-planning service for post-graduate medical residents.	The percentage of post-graduate residents matched through Practice Ontario to communities with a RIO score of 40 or greater and/or designated as eligible for recruitment incentives (e.g. N3R, ROS).
		The number of Practice Ontario sessions delivered to residents in high-need specialties.
	Assist Ministry with placing Ontario's Return of Service physician candidates into acceptable employment settings.	LHIN client satisfaction rating.
	Facilitate the employment of Ontario's graduating Physician Assistants to sites in high-priority clinical and geographic areas.	The percentage of Ontario-trained Physician Assistants who participated in the Physician Assistant Program placed in the province.
	Manage the Clerkship Travel Program to support physician distribution in Ontario.	The number of attendees at the HPRT tour.
		HPRT participant satisfaction rates.
	Provide expert advice to practice-ready physicians interested in relocating to Ontario and to potential employers in high-need communities with significant physician vacancies.	The number of physicians recruited to Ontario, and the percentage of those who practise in priority specialties and communities with a RIO score of 40 or greater, and/or designated for recruitment incentives (e.g. N3R, ROS).
	Recruit U.S. physicians in accordance with the needs of the province. Support recruitment by showcasing the province as an ideal place to work and live.	Client satisfaction with recruitment services.
	Assist IEHPs on their path to practise their profession or transition to an alternative career consistent with their education and experience.	Client satisfaction ratings from IEHP surveys.
		The number of new IEHP clients.
		The average number of active clients.
		The number of active allied health professional clients in 2012/13 as compared to 2011/12.
		The number of international medical graduates matched to residency positions in North America.
	Coordinate and deliver four physician locum programs to provide necessary clinical services to eligible Ontario communities/hospitals.	The number of ED closures in Ontario due to lack of physician availability.
	Retain physicians in rural, remote and Northern Ontario through respite and vacancy coverage locum programs for eligible communities.	An alternative eligibility tool for NSLP has been shared with the Ministry along with a proposed implementation plan.
	Assume responsibility for the General Practitioner Vacancy Locum Coverage Arrangements.	Date the General Practitioner Vacancy Locum Program is ready for implementation in 2013/14.
	Work in partnership with Ontario's LHINs on health human resources issues.	Client satisfaction ratings achieved in locum programs.
	Serve as a policy advisory/reference group to the Ontario government and other related stakeholders on recruitment, retention and physician coverage issues.	Quarterly financial reporting to the Ministry is completed as per the Memorandum of Understanding (MOU) and Transfer Payment Agreement (TPA), and submitted within the required timeframe.
	Develop and/or manage other elements of the government's HHR strategy, as agreed upon by HFO MRA and the Ministry.	The external auditor produces an unqualified audit opinion for the Agency.
	Ensure financial accountability and good governance practices.	Implement recommendations from the external auditor's Management Letter where appropriate.

2012/13 HFO MRA Performance Results

Targets	Actuals
More than 60% of Practice Ontario post-graduate resident matches will be to a community with a RIO score of 40 or greater and/or designated as eligible for recruitment incentives (e.g. N3R, ROS).	66% of Practice Ontario post-graduate resident matches were to a community with a RIO score of 40 or greater and/or designated as eligible for recruitment incentives (e.g. N3R, ROS).
Increase the number of Practice Ontario sessions in high-need specialties (e.g. Family Medicine, Emergency Medicine, Psychiatry) by 10% over 2011/12.	The number of Practice Ontario sessions decreased from 89 to 62 (30%).*
More than 75% of LHIN clients are satisfied with Regional Advisor performance.	100% of LHIN clients rated Regional Advisor performance as satisfactory or higher.
Place a minimum of 90% of Ontario-trained Physician Assistants who are participating in the Physician Assistant Program in positions within Ontario.	100% of Ontario-trained Physician Assistants participating in the Physician Assistant program placed in Ontario.
Increase the number of attendees at the Health Professionals Recruitment Tour (HPRT) tour by 10% over last tour.	The number of attendees at HPRT decreased by 21% since the last tour.**
More than 75% of HPRT participants rate the 2012 HPRT tour as satisfactory or higher.	80% of HPRT participants rated the 2012 HPRT tour as good, very good or excellent.
The successful recruitment to Ontario of at least 100 physicians from outside the province, 75% or more of whom practise in priority specialties, and 60% of whom are recruited to communities with a RIO score of 40 or greater and/or designated as eligible for recruitment incentives (e.g. N3R, ROS).	The successful recruitment to Ontario of 162 physicians from outside the province, 72% of whom practise in priority specialties***, and 66% of whom were recruited to communities with a RIO score of 40 or greater and/or designated as eligible for recruitment incentives (e.g. N3R, ROS).
More than 75% of clients rate the Agency's recruitment services as satisfactory or higher.	83% of clients rated the Agency's recruitment services as satisfactory or higher.
More than 75% client satisfaction ratings from IEHP client-based surveys.	88% client satisfaction ratings from IEHP client-based surveys.
More than 3,100 new IEHP clients register with the Agency.	3,024 new IEHP clients registered with the Agency.****
Average more than 2,000 active IEHP clients.	2,200 active IEHP clients.
Increase the number of active allied health professional clients by 10% in 2012/13.	Increased the number of active allied health professional clients by 30% in 2012/13.
Match 175 or more international medical graduates to residency positions in North America.	Matched 291 international medical graduates to residency positions in North America.
Through the Emergency Department Coverage Demonstration Project, assist in ensuring there are 0 unplanned ED closures in Ontario due to lack of physician availability.	There were 0 Emergency Department closures in Ontario due to lack of physician availability.
With Ministry agreement, implement an alternative eligibility tool for the Northern Specialist Locum Programs.	A new eligibility tool for NSLP was approved by the Ministry and implemented.
Develop a General Practitioner Vacancy Locum Program for implementation in 2013/14.	A new approach for the General Practitioner Vacancy Locum Coverage Arrangements was developed and approved by the Ministry in 2012/13.
More than 75% client satisfaction ratings from locum programs client-based surveys.	85% of clients rated the locum programs as satisfactory or higher.
Continue to complete quarterly financial reporting to the Ministry as per the MOU and TPA.	Quarterly reports submitted.
Unqualified audit opinion from the external auditors for the Agency.	An unqualified audit opinion was received from the external auditors for the Agency.
Implement the recommendations of the external auditor's Management Letter.	The external auditor did not make any recommendations for improvement.

* In 2012/13, Practice Ontario decreased its total number of presentations and instead focused on presenting to larger groups of residents to increase overall exposure. Through these efforts, the number of Practice Ontario registrants increased by 47% over 2011/12 (1,000 new registrants in 2012/13 compared to 681 in 2011/12). Additionally, the number of new registrants in high-need specialties (e.g., Family Medicine, Emergency Medicine, Psychiatry) increased by 42% over 2011/12.

** The fall 2012 HPRT was attended by 960 health professionals who were either in training or practice in Ontario. Feedback from communities and participants was overwhelmingly positive. The lower than anticipated number of attendees is attributable to a number of factors, including: the 2010 tour (baseline measure) had the highest attendance in the history of HPRT with 1,217 attendees, the absence of a tour in 2011 decreased awareness of the tour among new learners, some venues for the 2012 HPRT were off-campus and more difficult for learners to access. To address these factors, planning for the 2013 HPRT is incorporating the use of additional marketing materials, stronger coordination with educational institutions and venues that are as convenient as possible for learners.

*** Emergency Medicine, Family Medicine, Psychiatry, and General Internal Medicine were designated as priority specialties based on the forecasted need for these specialties in the province. In 2012/13, 117 physicians with these specialties were recruited (72% of the 162 total recruited). The goal of recruiting at least 100 physicians in total was surpassed by 62% and the goal of recruiting at least 75 physicians from these specialties was exceeded by 56%. However, the 117 physicians recruited from these priority specialties fell five short of the 75% goal.

**** 3,024 new IEHP clients registered with the Access Centre, falling short of the 3,100 target by 2.5%. This may have resulted from reduced immigration of IEHPs due to a change in the Federal Skilled Worker Program. New Internationally Educated Nurses (IEN) initiatives at the Access Centre have already significantly increased the average monthly registration total in 2013/14.

IT Systems

HFO MRA redesigned the look and feel of HealthForceOntario.ca to better serve the Agency's client groups by greatly improving site visitors' ability to find the information they are seeking. Additionally, the web site was updated to meet the Ministry style guide, and a content management system was introduced, which has resulted in more timely updates.

The Agency created a database solution to manage the Clerkship Travel Program's applications and payments, making it possible to process large batches of applications in a short period of time. Much attention was paid to producing a secure system that could meet the program parameters determined by the Province.

The delivery of internationally educated health professionals (IEHP) client services via webinars has increased by more than 50% in 2012/13, expanding the Agency's ability to deliver high quality, interactive sessions to clients living outside the Greater Toronto Area and to work with Canadian Immigrant Integration Program and pre-arrival clients.

The Northern Specialist Locum Programs (NSLP) successfully implemented a new database application that improves program efficiency through automation as well as increases reporting and data tracking abilities. The new application also accommodates recent changes made to the program payment structure.

Infrastructure

In 2012/13, the Agency began using office space at the Centre of Education and Training in Brampton, which has enabled it to provide IEHP Advisory services locally to more than 800 clients in the Brampton area.

New Processes

The Agency established a new client service management process for graduating Ontario residents with international medical graduate (IMG) Return of Service (ROS) obligations. The client service function was integrated within the Physician Recruitment Advisor team and a central liaison was established for the Ministry of Health and Long-Term Care to address client and policy related requests. ROS client case management protocols were developed and supported by related information technology enhancements.

The number of IMG client mock interviews was reduced from three to two this past year to facilitate more effective delivery of other services such as courses and sessions.

Regional Advisors established a new "Specialist Champion" approach to assist medical residents in Ontario with their job search. Regional Advisors have now assumed responsibility for specific specialties, which allows them to become content experts on their assigned specialty with knowledge of job opportunities across the province. In addition to being able to connect specialist clients with a content expert for their specialty, this new approach will mean clients have a single point of contact to guide them through their job search provincially.

Program Supports

With recent changes at the College of Nurses of Ontario for internationally educated nurses (IENs) and the introduction of an Objective Structured Clinical Examination (OSCE), the Agency anticipates a significant increase in IEN clients. In response, it has developed an OSCE workshop and DVD to assist hundreds of IEN clients in the coming months.

Corporate Governance

Board Responsibilities

The role of the HFO MRA Board is to oversee the operation and management of the Agency and staff, and engage in activity relating to Agency policy. The Board is accountable to the Minister of Health and Long-Term Care for the Agency's use of public funds and results in terms of goals, objectives, performance, and strategic direction for the Agency.

Board Membership and Structure

Ontario Regulation 249/07 stipulates the Board shall be a maximum of nine members, one of whom is appointed Chair. For the 2012/13 year, the HFO MRA Board comprised five members with a wealth of experience and expertise related to governance, financial management, academics, clinical practice, and other areas. Additional members are being recruited.

All HFO MRA Board members are appointed by the Lieutenant Governor in Council.

There is one committee of the Board – Finance and Audit – which meets, reviews financial statements and reports to the Board on a regular basis.

Board Development

New Board members receive an orientation both from Agency staff as well as the relevant Government divisions with which the Agency interacts. Topics covered include: the health human resources landscape; an overview of the Agency; and relevant Government legislation, processes, and expectations.

In addition, through regular information sessions, the Board receives updates on a range of Agency programs and Government directions.

Conflict of Interest Policy and Codes of Ethics/Conduct

The Agency has a Conflict of Interest policy and codes of ethics/conduct, which is in compliance with the *Public Service of Ontario Act, 2006*.

Board Schedule

The Board meets regularly from September through June, with availability electronically should the need for Board advice or decision become necessary between meetings.

See Appendix A for biographies for each Board member.

Government Directives

As per the Memorandum of Understanding, the Agency complies with Directives, Policies, and Guidelines issued by the Government. To maintain compliance, the Agency communicates with the Ministry to keep informed of the new Directives or changes to existing Directives and to receive copies of such documents.

Financial Statements of

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Years ended March 31, 2013 and 2012

KPMG LLP
Chartered Accountants
Yonge Corporate Centre
4100 Yonge Street Suite 200
Toronto ON M2P 2H3
Canada

Telephone (416) 228-7000
Fax (416) 228-7123
Internet www.kpmg.ca

INDEPENDENT AUDITORS' REPORT

To the Board of Directors and HealthForceOntario Marketing
and Recruitment Agency

We have audited the accompanying financial statements of HealthForceOntario Marketing and Recruitment Agency, which comprise the statements of financial position as at March 31, 2013, March 31, 2012 and April 1, 2011, the statements of operations, changes in net assets and cash flows for the years ended March 31, 2013 and March 31, 2012, and notes, comprising a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained in our audits is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of HealthForceOntario Marketing and Recruitment Agency as at March 31, 2013, March 31, 2012 and April 1, 2011, and its results of operations and its cash flows for the years ended March 31, 2013 and March 31, 2012 in accordance with Canadian public sector accounting standards.

The financial statements of HealthForceOntario Marketing and Recruitment Agency as at and for the year ended March 31, 2012 were audited by another auditor who expressed an unmodified opinion on those financial statements on July 12, 2012.

KPMG LLP

Chartered Accountants, Licensed Public Accountants

June 26, 2013
Toronto, Canada

KPMG LLP is a Canadian limited liability partnership and a member firm of the KPMG network of independent member firms affiliated with KPMG International Cooperative ("KPMG International"), a Swiss entity.
KPMG Canada provides services to KPMG LLP.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statements of Financial Position

March 31, 2013, March 31, 2012 and April 1, 2011

	March 31, 2013	March 31, 2012	April 1, 2011
Assets			
Current assets:			
Cash	$ 2,522,898	$ 2,445,699	$ 1,343,508
Prepaids	217,747	177,149	185,196
	2,740,645	2,622,848	1,528,704
Capital assets (note 2)	138,516	127,411	174,845
Capital assets - transitional councils	–	–	16,670
	$ 2,879,161	$ 2,750,259	$ 1,720,219
Liabilities and Net Assets			
Current liabilities:			
Accounts payable and accrued liabilities	$ 1,099,675	$ 2,604,871	$ 1,885,623
Deferred contribution	–	221,672	–
	1,099,675	2,826,543	1,885,623
Net assets:			
Unrestricted (deficiency)	1,640,970	(203,695)	(356,919)
Invested in capital assets	138,516	127,411	191,515
	1,779,486	(76,284)	(165,404)
Commitments and contingencies (note 8)			
Economic dependence (note 9)			
	$ 2,879,161	$ 2,750,259	$ 1,720,219

See accompanying notes to financial statements.

On behalf of the Board:

Director

Director

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statements of Operations

Years ended March 31, 2013 and 2012

	2013	2012
Revenue:		
Ministry of Health and Long-Term Care - Component	$ 10,962,800	$ 12,256,000
Ministry of Health and Long-Term care		
Physician Assistant Grant Program (note 5)	4,321,672	914,403
Health Integration Resources and Education ("HIRE")	215,826	–
	15,500,298	13,170,403
Expenses:		
Salaries and benefits	7,478,737	6,832,032
Base:		
Corporate affairs	1,415,578	1,403,425
Clerkship Travel Program	185,388	–
Amortization	180,689	131,467
Access centre	167,536	112,934
Community partnership	138,480	113,851
Ontario Physician Locum Programs ("OPLP") (note 3)	44,550	36,361
Recruitment and retention outreach	29,127	96,828
Website	26,675	36,997
HFOJobs	7,073	18,320
Board of Directors	5,295	6,745
One-time:		
Physician Assistant ("PA") Grant Program (note 5)	3,643,791	867,957
Health Professionals Recruitment Tour	130,119	–
Other	110,972	–
Nursing graduate guarantee	80,435	79,000
HIRE	83	–
Inter-professional care ("IPC") initiatives group (note 4)	–	7,722
Total expenses before undernoted	13,644,528	9,745,639
Management fee allocation to Transitional Councils (note 6)	–	(732,751)
Total expenses before Transitional Councils	13,644,528	9,012,888
Transitional Councils (note 6)	–	4,068,395
Total expenses	13,644,528	13,081,283
Excess of revenue over expenses	$ 1,855,770	$ 89,120

See accompanying notes to financial statements.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statements of Changes in Net Assets

Years ended March 31, 2013 and 2012

March 31, 2013	Invested in capital assets	Unrestricted	Total
Balance, beginning of year	$ 127,411	$ (203,695)	$ (76,284)
Excess of revenue over expenses	(180,689)	2,036,459	1,855,770
Net change in investment in capital assets	191,794	(191,794)	–
Balance, end of year	$ 138,516	$ 1,640,970	$ 1,779,486

March 31, 2012	Invested in capital assets	Unrestricted	Total
Balance, beginning of year	$ 191,515	$ (356,919)	$ (165,404)
Excess of revenue over expenses	(131,467)	220,587	89,120
Net change in investment in capital assets	67,363	(67,363)	–
Balance, end of year	$ 127,411	$ (203,695)	$ (76,284)

See accompanying notes to financial statements.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statements of Cash Flows

Years ended March 31, 2013 and 2012

	2013	2012
Cash provided by (used in):		
Operating activities:		
Excess of revenue over expenses	$ 1,855,770	$ 89,120
Amortization of capital assets which does not involve cash	180,689	131,467
Change in non-cash operating working capital:		
Prepaids	(40,598)	8,047
Accounts payable and accrued liabilities	(1,505,196)	719,248
Deferred contribution	(221,672)	221,672
	268,993	1,169,554
Investing activities:		
Net purchase of capital assets	(191,794)	(67,363)
Net increase in cash	77,199	1,102,191
Cash, beginning of year	2,445,699	1,343,508
Cash, end of year	$ 2,522,898	$ 2,445,699

See accompanying notes to financial statements.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements

Years ended March 31, 2013 and 2012

HealthForceOntario Marketing and Recruitment Agency (the "Agency") is an operational service agency of the Ministry of Health and Long-Term Care (the "Ministry"). The Agency was incorporated without share capital under the Development Corporations Act, Regulation 249/07, as of June 6, 2007. As part of the Regulation, the Agency is only allowed to receive money or assets from The Crown in Right of Ontario.

The creation of the Agency arose out of the government's health human resource strategy. The Agency is dedicated to making Ontario the "employer of choice" in health care, and to ensure Ontarians have access to the right number and mix of qualified health care providers, when and where they are needed, now and in the future. The Agency's programs and services can be grouped in two categories:

1. Retention and distribution of Ontario's health professionals;

2. Recruitment of and outreach to:

   (a) Internationally educated health professionals living in Ontario;

   (b) Ontario's recruitment community;

   (c) Practice-ready physicians in high-need specialties outside of Ontario.

Consistent with the 2011/2012 Transfer Payment Agreement ("TPA"), Schedule A, the Memorandum of Understanding, and the Development Corporations Act, the Agency executes programs and services as follows:

- Outreach to physicians from outside Ontario;
- Internationally Educated Health Professionals ("IEHP") Advisory Services;
- IEHP workplace integration - HIRE IEHP;
- Ontario physician retention/Practice Ontario/Return of Service;
- HealthForceOntario.ca and HFOJobs.ca;

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

- Regional Advisors;
- Emergency Department Coverage Demonstration Project;
- Rural Family Medicine Locum Program;
- Northern Specialist Locum Programs;
- General Practitioner Vacancy Locum Coverage Arrangements;
- Corporate Affairs;
- Physician Assistant Grants;
- Clerkship Travel Program;
- Health Professionals Recruitment Tour;
- Facilities Services to the five Transitional Councils for regulatory health professional colleges; and
- Client support for the Nursing Graduate Guarantee initiative.

On April 1, 2012, the Agency adopted Canadian public sector accounting standards. The Agency has also elected to apply the 4200 standards for government not-for-profit organizations. These are the first financial statements prepared in accordance with these public sector accounting standards.

In accordance with the transitional provisions in public sector accounting standards, the Agency has adopted the changes retrospectively, subject to certain exemptions allowed under these standards. The transition date is April 1, 2011 and all comparative information provided has been presented by applying public sector accounting standards.

There were no transitional adjustments to net assets as at April 1, 2011 or excess of revenue over expenses for the year ended March 31, 2012 as a result of the transition to the public sector accounting standards.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

1. Significant accounting policies:

The financial statements have been prepared by management in accordance with Canadian public sector accounting standards including the 4200 standards for government not-for-profit organizations.

(a) Revenue recognition:

The Agency is funded through three TPAs with the Ministry. The principal TPA provides funding for the majority of the Agency's expenses including salaries and benefits, base and one-time funding. A secondary TPA provides funding for the Physician Assistant Grant Program (note 5) which the Agency administers on behalf of the Ministry.

Health Canada and Ontario have entered into an agreement for funding to conduct a multi-year project to examine how practice site interventions can support fuller integration of internationally educated health professionals into the workforce. The Ministry has partnered with HFO MRA and the University of Toronto to implement this project.

The Agency follows the deferral method of accounting for contributions which include government grants.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

The Agency does not receive externally restricted contributions as all funding must be received from the Ministry.

(b) Expenses:

The Agency divides its expenditures into two categories: Base and One-time. Base expenses include funds expended by the Agency to provide on-going programs and services to clients and stakeholders, and corporate services to the Agency. One-time expenses relate to programs and services to clients and stakeholders which may be limited to the current fiscal year.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

1. Significant accounting policies (continued):

(c) Allocation of expenses:

The Agency records a number of its expenses by program. The cost of each program includes the personnel, premise and other expenses that are directly related to providing the program.

Administration and corporate governance are not allocated.

(d) Capital assets:

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at fair value at the date of contribution. Assets acquired under capital leases are amortized over the estimated life of the assets or over the lease term, as appropriate. Repairs and maintenance costs are charged to expense. Betterments which extend the estimated life of an asset are capitalized. When a capital asset no longer contributes to the Agency's ability to provide services, its carrying amount is written down to its residual value.

Works of art, historical treasures, and intangible assets are not recognized in these financial statements.

Capital assets are amortized on a straight-line basis using the following annual rates:

Furniture and fixtures	20%
Computer hardware	33%
Computer software	33% - 100%
Leasehold improvements	Lease term

(e) Employee future benefits:

The costs of multi-employer defined contribution pension plan benefits, such as the Public Service Pension Plan ("PSPP"), are the employer's contributions due to the plan in the period.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

1. Significant accounting policies (continued):

(f) Use of estimates:

The preparation of the financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the year. Significant items subject to such estimates and assumptions include the carrying amount of capital assets, and obligations related to employee future benefits. Actual results could differ from those estimates.

2. Capital assets:

March 31, 2013	Cost	Accumulated amortization	Net book value
Furniture and fixtures	$ 178,410	$ 145,396	$ 33,014
Computer hardware	291,585	238,849	52,736
Computer software	222,226	214,097	8,129
Leasehold improvements	261,675	217,038	44,637
	$ 953,896	$ 815,380	$ 138,516

March 31, 2012	Cost	Accumulated amortization	Net book value
Furniture and fixtures	$ 140,095	$ 129,006	$ 11,089
Computer hardware	227,215	190,961	36,254
Computer software	186,681	170,424	16,257
Leasehold improvements	208,111	144,300	63,811
	$ 762,102	$ 634,691	$ 127,411

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

2. Capital assets (continued):

April 1, 2011	Cost	Accumulated amortization	Net book value
Furniture and fixtures	$ 140,094	$ 100,987	$ 39,107
Computer hardware	197,745	163,483	34,262
Computer software	185,745	161,359	24,386
Leasehold improvements	157,579	80,489	77,090
	$ 681,163	$ 506,318	$ 174,845

The Agency has full use and enjoyment of assets paid for by the Government of Ontario, as such the historical cost of these assets is not recorded in the Agency's books. Assets paid for by the Government of Ontario include leasehold improvements, computer hardware and furniture and fixtures.

3. Ontario Physician Locum Programs:

The OPLP provides centralized and coordinated locum physician assistance for hospitals, communities and physicians across the Province of Ontario. The Ministry makes the payments directly to the physicians for the locum services provided. The Agency administers the programs and records as expenses the general operating costs and salaries and benefits.

During the year, $44,550 (2012 - $36,361) was expensed by the Agency for general operating costs relating to the administration of the program.

During the year, OPLP physician payments made by the Ministry were $23,450,759 (2012 - $21,859,557). The OPLP physician payments issued by the Ministry directly to physicians are not presented on the statement of operations for the year ended March 31, 2013 due to changes in the Ministry's direction on physician payment processes in fiscal 2012 and onwards. For fiscal 2012 and beyond, the Ministry has decided it will issue physician payments directly. The Ministry's prior intention was for the Agency to issue physician payments directly. Under this new direction, funds flowing through the Agency are for the purpose of OPLP administration only. No funds will flow to the Agency for physician payments.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

4. Inter-professional Care Initiatives Group:

IPC is the provision of comprehensive health services to patients by multiple health care professionals who work collaboratively to deliver the best quality of care in every health care setting. The Agency administered IPC grant disbursements and recorded in the Agency's statement of revenue and expenses the general operating costs, which are comprised primarily of salaries and benefits, which are included in the salaries and benefits financial statement line item. The amount reflected in one time IPC initiatives group of nil (2012 - $7,722) represented general operating costs.

On July 1, 2011, the Ministry assumed full responsibility for the administration of the IPC grant disbursements. In fiscal 2013, the Agency administered nil (2012 - $92,091) of IPC grant disbursements.

5. Physician Assistant Grant Program:

PAs are health care practitioners who have been certified or are eligible to be certified by the Canadian Association of Physician Assistants as PA's in Canada. Two educational programs exist in Ontario: McMaster University and the Consortium of PA Education, which comprises of the University of Toronto, the Northern Ontario School of Medicine and the Michener Institute for Applied Health Sciences. During the current fiscal year, the Ministry provided funding to the Agency to administer the PA graduate employment support initiative for the 2010, 2011 and 2012 graduates of the two Ontario PA education programs. The objectives of the PA graduate employment support initiative are to encourage the hiring of PA graduates in a relatively new and developing profession; and facilitate the employment of PA graduates in priority clinical and geographic areas.

During the year, total funding received from the Ministry was $4,100,000 (2012 - $1,136,075). $4,321,672 (2012 - $914,403) has been recognized as revenue. The Agency incurred expenses of $3,752,120 (2012 -$ 920,973) which comprised salaries and benefits of $108,329 (2012 - $53,016) and $3,643,791 in program expenses (2012 - $867,957) and has deferred nil (2012 - $221,672).

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

6. Transitional Councils ("TC"):

Prior to fiscal 2013, to reflect an estimated cost of the free services provided to the TCs, a notional management fee was charged to each TC. The fee was charged at a rate of 15% of TC expenses. The management fee was eliminated on the combined Agency statement of revenue and expenses. The TCs did not remit payment and the Agency did not receive funds from the TCs as the Agency cannot receive money or assets from any person or entity other than the Crown in right of Ontario per regulation.

The amounts expended during the year related to the TCs (including the allocated management fee) were as follows:

	2013	2012
Transitional Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario	$ –	$ 746,799
Transitional Council of the College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario	–	764,713
Transitional Council of the College of Kinesiologists of Ontario	–	893,295
Transitional Council of the College of Homeopaths of Ontario	–	869,643
Transitional Council of the College of Naturopaths of Ontario	–	793,945
	$ –	$ 4,068,395

7. Employee future benefits:

The Agency makes contributions to the PSPP, which is a multi-employer plan, on behalf of 90 members of its staff. The plan is a defined benefit plan which specifies the amount of the retirement benefit to be received by the employees based on the length of service and rates of pay.

Contributions for employees with a normal retirement age of 65 were being made at a rate of 6.4% for earnings up to the yearly maximum pensionable earnings of $51,000 and at a rate of 9.5% for earnings greater than the yearly maximum pensionable earnings. The amount contributed to PSPP for 2013 was $453,299 (2012 - $374,445) for current service and is included as an expense on the consolidated statement of operations. Employees' contribution to PSPP in 2013 was $457,435 (2012 - $403,464).

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

8. Commitments and contingencies:

(a) The Agency has entered into an operating lease for premise which expires 2018. Approximate future minimum lease payments are as follows:

2014	$ 473,800
2015	483,800
2016	483,800
2017	483,800
2018	161,300
	$ 2,086,500

(b) Indemnity insurance has been provided to all directors and officers of the Agency for various items including, but not limited to, all costs to settle suits or actions due to association with the Agency, subject to certain restrictions. The Agency has purchased directors' and officers' liability insurance to mitigate the cost of any potential future suits or actions. The term of indemnification is not explicitly defined, but is limited to the period over which the indemnified party served as a director or officer of the Agency. The maximum amount of any potential future payment cannot be reasonably estimated.

The nature of this indemnification agreements prevents the Agency from making a reasonable estimate of the maximum exposure due to the difficulties in assessing the amount of liability which stems from the unpredictability of future events and the unlimited coverage offered to counterparties.

9. Economic dependence:

The Agency is economically dependent upon the continued financial support of the Ministry.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

10. HealthForceOntario Marketing and Recruitment Agency:

	Salaries and benefits	General operations	Actual	Budget
Revenues:				
Component			$ 10,962,800	$ 13,592,800
PA Funding			4,321,672	6,768,525
HIRE Funding			215,826	324,600
Total			$ 15,500,298	$ 20,685,925
Expenses:				
Base components:				
Board of Directors:				
Salaries and benefits	16,538		$ 16,538	$ 26,580
General operating		5,295	5,295	10,420
Total			21,833	37,000
Corporate Affairs:				
Salaries and benefits	2,068,302		2,068,302	2,072,029
General operating		1,596,266	1,596,266	1,941,707
Total			3,664,568	4,013,736
Clerkship Travel Program:				
General operating		185,388	185,388	2,630,000
Total			185,388	2,630,000
Access Centre:				
Salaries and benefits	1,990,877		1,990,877	1,995,076
General operating		167,536	167,536	235,300
Total			2,158,413	2,230,376
Website:				
General operating		26,625	26,625	58,000
Total			26,625	58,000
HFOJobs:				
Salaries and benefits	106,094		106,094	105,953
General and operating		7,073	7,073	11,320
Total			113,167	117,273
Outreach:				
Salaries and benefits	93,572		93,572	288,232
General operating		29,127	29,127	197,800
Total			122,699	486,032
Community Partnership:				
Salaries and benefits	1,118,695		1,118,695	1,190,545
General operating		138,480	138,480	199,790
Total			1,257,175	1,390,335
OPLP:				
Salaries and benefits	1,448,592		1,448,592	1,544,649
General operating		44,550	44,550	70,400
Total			1,493,142	1,615,049
Base component total			$ 9,043,010	$ 12,577,801

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Years ended March 31, 2013 and 2012

10 HealthForceOntario Marketing and Recruitment Agency (continued):

	Salaries and benefits	General operations	Actual	Budget
One-time components:				
NGG:				
Salaries and Benefits	199,817		$ 199,817	$ 199,906
General operating		80,485	80,485	80,094
Total			280,302	280,000
HPRT:				
Salaries and Benefits	57,697		57,697	80,405
General operating		130,119	130,119	154,595
Total			187,816	235,000
Other:				
Salaries and Benefits	192,247		192,247	150,954
General operating		110,972	110,972	349,046
Total			303,219	500,000
Physician Assistant:				
Salaries and Benefits	108,329		108,329	110,094
General operating		3,643,791	3,643,791	6,658,430
Total			3,752,120	6,768,524
HIRE:				
Salaries and Benefits	77,978		77,978	282,815
General Operating		83	83	41,785
Total			78,061	324,600
One-time component total			$ 4,601,518	$ 8,108,124
Total expenses			**$ 13,644,528**	**$ 20,685,925**
Surplus/(shortage)			**$ 1,855,770**	

Analysis of Financial Position

- The audited financial statements are included in this Annual Report. Expenditures for base funding and one-time funding, including expenditures on the Physician Assistant Grant Program, were within budget.
- In 2012/2013, HealthForceOntario Marketing and Recruitment Agency (HFO MRA) received $15,500,298 in revenue from the Ministry of Health and Long-Term Care (MOHLTC). Of this funding, $10,962,800 was received through a Transfer Payment Agreement (TPA) with the Ministry to support base program and one-time expenditures. Revenue from two additional TPA's was received to support the Physician Assistant Grant Program, in the amount of $4,321,672, and the Health Integration Resources and Education (HIRE) initiative, in the amount of $215,826.
- The 2012/2013 fiscal year is the second year in which HFO MRA received full direct funding from the Ministry. Prior to 2011/2012, the Ministry funded a third party paymaster to remit vendor payments on behalf of HFO MRA, except for 2010/2011 in which the Agency received funding for payroll costs only. As such, 2012/2013 is the first year in which HFO MRA was able to present a full set of financial statements including Statements of Financial Position, Statements of Operations, Statements of Changes in Net Assets and Statements of Cash Flows.
- Ontario Physician Locum Program physician payments continue to be paid directly to the recipient physicians by the Ministry. The physician payments made by the Ministry are recorded in the Notes to the Financial Statements (Note 3).
- On April 1, 2012, HFO MRA adopted Public Sector Accounting Standards (PSAS) and elected to apply the 4,200 standards for Government not-for-profit organizations. Since the 2012/2013 financial statements are the first to be prepared in accordance to PSAS, they contain a Statements of Financial Position with three columns including the current year, comparative year and the transition date (the beginning of the comparative year). No significant changes or implications were identified as a result of the newly adopted PSAS for any of the periods presented in the financial statements.
- In 2012/2013, the Agency did not provide paymaster services for the Transitional Councils for five regulatory colleges; however, the Agency continued to provide facility and information technology support to the Transitional Colleges on a no-cost basis. Actual costs are reflected in the Agency's Statements of Operations.

Appendix A:
Board Member Biographies

Dr. Peter Wells, Chair

Initial Tenure: June 27, 2007 to June 27, 2012
Reappointed: July 18, 2012
Appointed as Chair: July 18, 2012
Current Term of Appointment Expires: July 17, 2015

Dr. Wells is the Founder and Executive Director of the Rural Ontario Medical Program, as well as a Family Medicine physician with a busy practice in Collingwood. He is a part-time Assistant Clinical Professor with McMaster University and Assistant Professor with the University of Toronto. In 2012, the College of Family Physicians of Canada named Dr. Wells Ontario's Family Physician of the Year.

Ms. Carolyn Acker

Initial Tenure: October 8, 2008 to October 7, 2011
Reappointed: November 16, 2011
Current Term of Appointment Expires: November 15, 2014

Ms. Acker began her career as a Registered Nurse at Saint Michael's Hospital and then with Saint Elizabeth Health Care. She served as Executive Director of the Regent Park Community Health Centre and is Founder of Pathways to Education Canada. In 2012, she became a member of the Order of Canada for her contributions to increasing access to education for thousands of disadvantaged students across the country.

Dr. Robert Howard

Initial Tenure: October 22, 2008 to October 21, 2011
Reappointed: November 16, 2011
Current Term of Appointment Expires: November 15, 2014

Dr. Howard is President and Chief Executive Officer of St. Michael's Hospital in Toronto. He joined the hospital as a staff Cardiologist in 1982 and has since held various leadership positions including Chief Medical Officer and Executive Vice-President, Programs and Education.

Dr. John G. Kelton

Initial Tenure: October 22, 2008 to October 21, 2011
Reappointed: November 16, 2011
Current Term of Appointment Expires: November 15, 2014

Dr. Kelton is Dean of the Faculty of Health Sciences and Vice-President of McMaster University. He has an active clinical practice and conducts research into platelet and bleeding disorders with a particular focus on bleeding disorders of pregnant women and heparin-induced thrombocytopenia. In 2013, Michael G. DeGroote, Hamilton Health Sciences, St. Joseph's Healthcare Hamilton and McMaster University announced an award in tribute to the research excellence of Dr. Kelton: The Dr. John G. Kelton Academic Award.

Mr. Arun K. Mathur

Appointed: May 17, 2011
Term of Appointment Expires: May 16, 2014

Mr. Mathur, a Chartered Accountant, is the partner in charge of the Toronto-area office of Gerald Duthie & Co. LLP Chartered Accountants. He helps business owners facing growth and financial challenges, and advises clients on business acquisitions and complex business problems.

HealthForceOntario

HealthForceOntario Marketing and Recruitment Agency

163 Queen Street East
Toronto, Ontario
M5A 1S1

Tel: 416-862-2200
E-mail: info@healthforceontario.ca
www.HealthForceOntario.ca

© Queen's Printer for Ontario, 2013